VERIFICATION OF CALIBRATION REPORT

of DataMaster cdm Breath Test Instrument State of Alaska

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

	DataMaster cdm S/N 130293
Supervi	isor/Operator Performing the Verification Procedure: Name DAN STURICLE ID#3559 Date 11-12-10
A	Agency Anchorage Police DOPT Phone # 786-8980
:	Instrument Location Engle River DerBSTATION
	Alco S/N 7526 D V Target Value 2081 High Pressure 750
В	Alco Test Values 1 st Alco 2 ^{na} Alco
	Signature Signature
	(OVER) WIND LI
	De Net units is the error heless)
	(Do Not write in the area below)
 I, Nita J. Bolz, after being first duly sworn, depose and state as follows: I am a Forensic Scientist IV at the State of Alaska Scientific Crime Detection Laboratory. The Alaska Scientific Crime Detection Laboratory is an entity within the Department of Public Safety. I am the Scientific Director of the State Breath Alcohol Program. In that capacity, I am responsible for overseeing the breath alcohol program, including assuring that persons responsible for verifying the calibration of instruments are properly trained and qualified. I also am responsible for maintaining the records of the program. The attached verification is a true and accurate verification of calibration that reflects a regularly conducted and regularly recorded activity of the breath alcohol program performed by a person trained and qualified to conduct the 	
verifica	
Nita Scienti State B	Bolz ific Director Breath Alcohol Program
Subscribed and sworn before me this 33 day of DEC, 2010.	
Notary	L. Nicholas Public, State of Alaska dission Expires with Office
23	L. Nicholas Public, State of Alaska hission Expires with Office NICHO PUBLIC SO PUBL

VERIFICATION OF CALIBRATION REPORT

of DataMaster cdm breath Test Instrument State of Alaska

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

DataMaster cdm S/N 130293 0W 12/9/10

(CONTINUED FROM FRONT PAGE)

C

TAPE THE TEST STRIP FROM THE NONDRINKING SUBJECT TEST AND THE DIAGNOSTIC CHECK IN THE MARKED BOXES.

NONDRINKING SUBJECT TEST

DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY DATAMASTER cdm 130293

NOVEMBER 12, 2010

Bymb will

OPERATOR'S NAME:

STURKIE

OPERATOR'S NUMBER: 3559

SUBJECT'S LAST NAME:

VOC

SUBJECT'S FIRST NAME/MI :

VOC

O.L. #: XXXXXXXXXX DEPT/AGENCY: ANC1

CASE/REPORT: VOC

TEST TYPE: V

ALCO TARGET VALUE: .081

ALCO S/N: 75260

--- BREATH ANALYSIS ---

.081 ADJUSTED FOR 29.41 in ALCO TARGET .079 14:08 BLANK TEST .000 14:09 INTERNAL STANDARD VERIFIED 14:09 ALCO TV 29.41 in .080 14:09 BLANK TEST .000 14:10 SUBJECT SAMPLE .000 14:11 BLANK TEST .000 14:11ALCO TV 29.41 in .081 14:12 BLANK TEST .000 14:12

ALASKA DEPARTMENT OF PUBLIC SAFETY DATAMASTER cdm 130293

NOVEMBER 12, 2010 TIME 14:06

--- DIAGNOSTIC CHECK ---

COMPUTER:

OKAY

PROGRAM:

OKAY

SOFTWARE DATE:

01/08/09

HEATERS

SAMPLE CHAMBER:

50c

BREATH TUBE:

41c

BAROMETER:

29.41 in

FLOW DETECTOR:

OKAY

PUMP

HIGH SPEED:

OKAY

OKAY

DETECTOR:

OIGLI

FILTERS:

OKAY

QUARTZ STANDARD:

OKAY

CALIBRATION:

OKAY

PRINTER TEST